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2061 15th Avenue West
Seattle, Washington 98119
Tel. (206) 386.PETS Fax (206) 386-4285
www.seattlenanimalshelter.org

DECLARATION OF CHANGE/RELINQUISHMENT OF PET OWNERSHIP

Previous Pet Owner's Name:

First	Middle Initial	Last
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Address: _____ **Seattle, WA Zip:** _____

Phone:
(h) _____ (w) _____ (cell) _____

Pet Name: _____ **Seattle Pet License Number:** _____

M/F _____ **Dog/Cat** _____ **Breed:** _____

Color: _____ **Microchip Number (if any):** _____

This is to inform you that I am relinquishing ownership/and or responsibility of the above mentioned and described pet to the person named below (New Pet Owner.)

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Previous Owner's Signature: _____

Date: _____

Declaration of Change/Relinquishment of Pet Ownership
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New Pet Owner's Name:		
_____	_____	_____
First	Middle Initial	Last
Address: _____		Seattle, WA Zip: _____
Phone:		
(h) _____	(w) _____	(cell) _____

This is to certify that I assume all legal responsibility towards the above-mentioned pet from the said date.

New Owner's Signature: _____

Date: _____

Licenses are not transferable. A new license application will be processed in your name and license fee payment must be made on this account.

In the event that the Previous Pet Owner is unavailable, please sign below:

This is to certify that I assume all legal responsibility towards the above-mentioned pet from the said date.

This is to further certify that I have acquired the pet stated above under legal means and that the previous owner is not available to sign this affidavit.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

New Owner's Signature: _____

Date: _____